

FORM <b>1</b> GENERAL	 <b>EPA</b>	U.S. ENVIRONMENTAL PROTECTION AGENCY <b>GENERAL INFORMATION</b> Consolidated Permits Program (Read the "General Instructions" before starting)	I. EPA I.D. NUMBER <div style="border: 1px solid black; padding: 2px;">           F I L D 0 0 5 1 8 0 0 7 0 3 0         </div>
LABEL ITEMS I. EPA I.D. NUMBER III. FACILITY NAME V. FACILITY MAILING ADDRESS VI. FACILITY LOCATION		<div style="border: 1px solid black; padding: 5px; margin: 0 auto; width: 150px;">           US EPA RECORDS CENTER REGION 5              396619         </div> <p style="font-weight: bold; font-size: 1.2em;">PLEASE PLACE LABEL IN THIS SPACE</p>	GENERAL INSTRUCTIONS If a preprinted label has been provided, affix it in the designated space. Review the information carefully, if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS													
INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.													
SPECIFIC QUESTIONS				MARK 'X'			SPECIFIC QUESTIONS				MARK 'X'		
				YES	NO	FORM ATTACHED					YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)							B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)						
					X							X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)				X		*	D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2C)					X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)				X		X	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)					X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)					X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)					X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)					X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)					X	

III. NAME OF FACILITY											
1 SKIP REYNOLDS METALS COMPANY, MCCOOK PLANT											
IV. FACILITY CONTACT											
A. NAME & TITLE (last, first, & title)								B. PHONE (area code & no.)			
2 HENRY A. T. BUSINESS UNIT MGR.								3 1 4 8 5 9 0 0 0			
V. FACILITY MAILING ADDRESS											
A. STREET OR P.O. BOX											
3 P. O. BOX 239											
B. CITY OR TOWN											
4 BROOKFIELD											
C. STATE D. ZIP CODE											
I L 6 0 5 1											
VI. FACILITY LOCATION											
A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER											
5 FIRST AVENUE AND 49TH STREET											
B. COUNTY NAME											
C O O K											
C. CITY OR TOWN											
MCCOOK											
D. STATE E. ZIP CODE F. COUNTY CODE (if known)											
I L 6 0 5 2 5 0 3 1											

**II. SIC CODES (4-digit, in order of priority)**

A. FIRST		B. SECOND	
3 3 5 3 (specify) Aluminum Sheet, Plate & Foil	7 3 3 6 1 (specify) Aluminum Foundries (Castings)		
C. THIRD		D. FOURTH	
3 3 9 8 (specify) Metal Heat Treating	7 3 4 7 9 (specify) Coating, Engraving & Allied Services NEC		

**III. OPERATOR INFORMATION**

A. NAME		B. Is the name listed in Item VIII-A also the owner?
REYNOLDS METALS COMPANY: ATTN: L. C. TROPEA		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)		D. PHONE (area code & no.)	
F = FEDERAL S = STATE P = PRIVATE	M = PUBLIC (other than federal or state) O = OTHER (specify) P (specify)	A	8 0 4 2 8 1 3 8 7 1

E. STREET OR P.O. BOX
6 0 1 W. BROAD STREET

F. CITY OR TOWN	G. STATE	H. ZIP CODE	IX. INDIAN LAND
RICHMOND	V A	2 3 2 6 1	Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

**EXISTING ENVIRONMENTAL PERMITS**

A. NPDES (Discharges to Surface Water)	D. PSD (Air Emissions from Proposed Sources)
N I L 0 0 0 1 3 4 1	9 P
B. UIC (Underground Injection of Fluids)	E. OTHER (specify)
U	9
C. RCRA (Hazardous Wastes)	E. OTHER (specify)
R	9

**I. MAP**

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements. F9: A/50

**II. NATURE OF BUSINESS (provide a brief description)**

The McCook Plant is engaged in the hot and cold rolling of alloyed aluminum into sheet, plate and coil. Further operations include aluminum foundry heat treating, and coil coating.

F9: A  
SI

**III. CERTIFICATION (see instructions)**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

NAME & OFFICIAL TITLE (type or print) Harry V. Helton, Vice President Corporate Operations Services	B. SIGNATURE 	C. DATE SIGNED 1980 Nov. 17
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**COMMENTS FOR OFFICIAL USE ONLY**

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<div style="display: inline-block; text-align: center;"><div>FORM</div><div style="font-size: 2em; font-weight: bold;">EPA</div><div>RCRA</div></div>		<div style="display: inline-block; text-align: center;"><div>U.S. ENVIRONMENTAL PROTECTION AGENCY</div><div style="font-size: 1.2em; font-weight: bold;">HAZARDOUS WASTE PERMIT APPLICATION</div><div>Consolidated Permits Program</div><div>(This information is required under Section 3005 of RCRA)</div></div>										<div style="display: inline-block; text-align: center;"><div>I. EPA I.D. NUMBER</div><div style="border: 1px solid black; padding: 2px;">F I L D 0 0 5 1 8 0 0 7 0 3 1</div></div>									
		FOR OFFICIAL USE ONLY																			
APPLICATION APPROVED					DATE RECEIVED (yr., mo., & day)					COMMENTS											
23					24					25											

**II. FIRST OR REVISED APPLICATION**

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

**A. FIRST APPLICATION** (place an "X" below and provide the appropriate date)

☒ **1. EXISTING FACILITY** (See instructions for definition of "existing" facility. Complete item below.)

YR.

59

MO.

11

DAY

01

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)

☐ **2. NEW FACILITY** (Complete item below.)

YR.

MO.

DAY

FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN

**B. REVISED APPLICATION** (place an "X" below and complete Item I above)

☐ **1. FACILITY HAS INTERIM STATUS**

☐ **2. FACILITY HAS A RCRA PERMIT**

**III. PROCESSES - CODES AND DESIGN CAPACITIES**

**A. PROCESS CODE** - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

**B. PROCESS DESIGN CAPACITY** - For each code entered in column A enter the capacity of the process.

**1. AMOUNT** - Enter the amount.

**2. UNIT OF MEASURE** - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
<b>Storage:</b>		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
<b>Disposal:</b>		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U

**Treatment:**

TANK

SURFACE IMPOUNDMENT

INCINERATOR

**OTHER** (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
ACRE-FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	Q

**EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below):** A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY		FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY		FOR OFFICIAL USE ONLY
		1. AMOUNT (specify)	2. UNIT OF MEASURE (enter code)				1. AMOUNT	2. UNIT OF MEASURE (enter code)	
X-1	S 0 2	200	G		5				
X-2	T 0 3	20	E		6				
1	S 0 1	5000000	G		7				
2					8				
3					9				
4					10				

# II. PROCESSES (continued)

SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE, INCLUDE DESIGN CAPACITY.

## IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS.....	P	KILOGRAMS.....	K
TONS.....	T	METRIC TONS.....	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

## D. PROCESSES

### 1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous waste: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO. X-1 X-2 X-3 X-4	A. EPA HAZARDOUS WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

## IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. (enter from page 1)

F I L D 0 0 5 1 8 0 0 7 0 3 6

## V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

F6: 1/55

## VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures, existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

F6: 36

## VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, &amp; seconds)

LONGITUDE (degrees, minutes, &amp; seconds)

8 7 5 0 2 1 0

0 4 1 4 7 5 0 0

## VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO (area code &amp; no)

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

## IX. OWNER CERTIFICATION

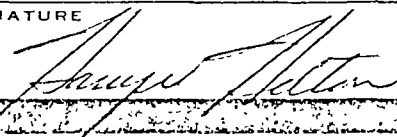
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

Harry V. Helton



1980 November 17

## X. OPERATOR CERTIFICATION

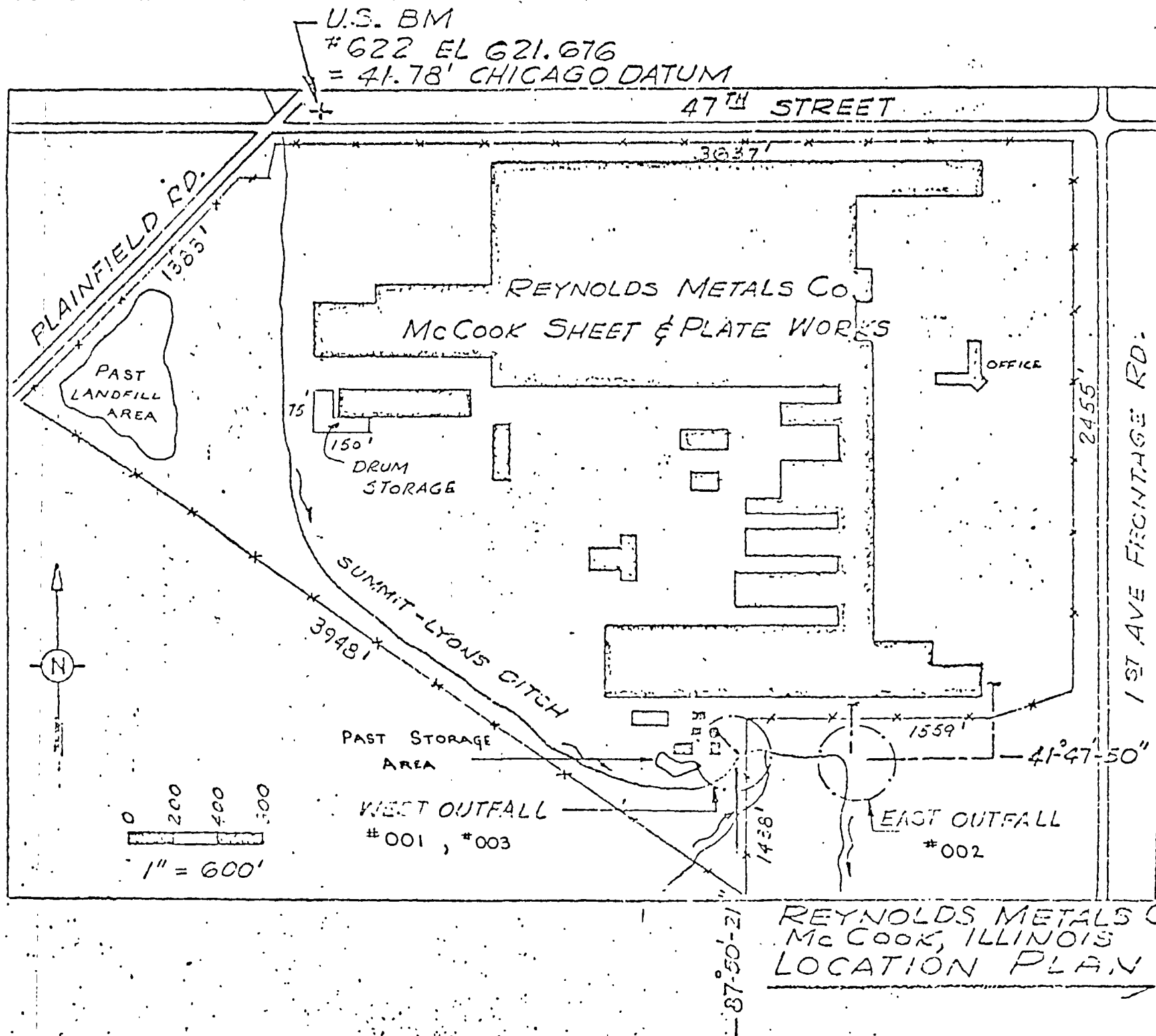
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

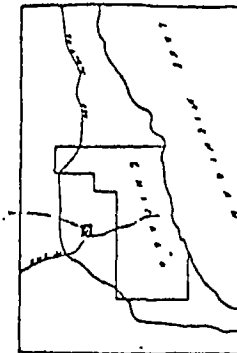
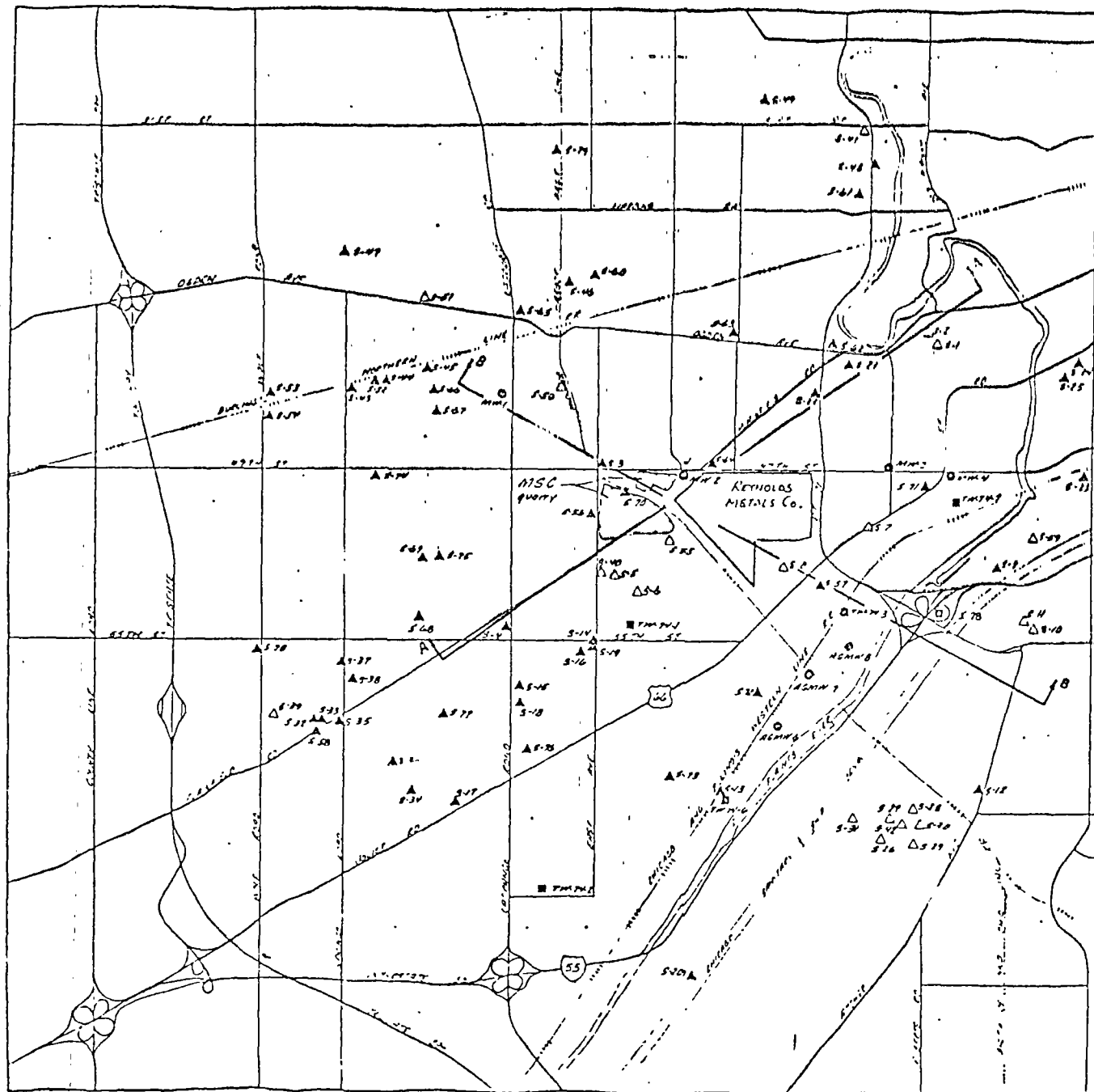
A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

EPA ID NUMBER (enter from page 1)															FOR OFFICIAL USE ONLY									
<div style="display: flex; justify-content: space-between;"> <span>W I L D 0 0 5 1 8 0 0 7 0</span> <span>T/A C</span> </div> <div style="display: flex; justify-content: space-between;"> <span>3 1</span> <span>13 14 15</span> </div>															<div style="display: flex; justify-content: space-between;"> <span>W</span> <span>DUP</span> <span>T/A C</span> </div> <div style="display: flex; justify-content: space-between;"> <span>3 2</span> <span>DUP</span> <span>13 14 15 21 26</span> </div>									
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																								
WASTE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES																				
				1. PROCESS CODES (enter)												2. PROCESS DESCRIPTION (if a code is not entered in D(1))								
1	F 0 1 7	110,000 gds	P	S 0 1																				
2																								
3																								
4																								
5																								
6																								
7																								
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SITE LOCATION PLAN

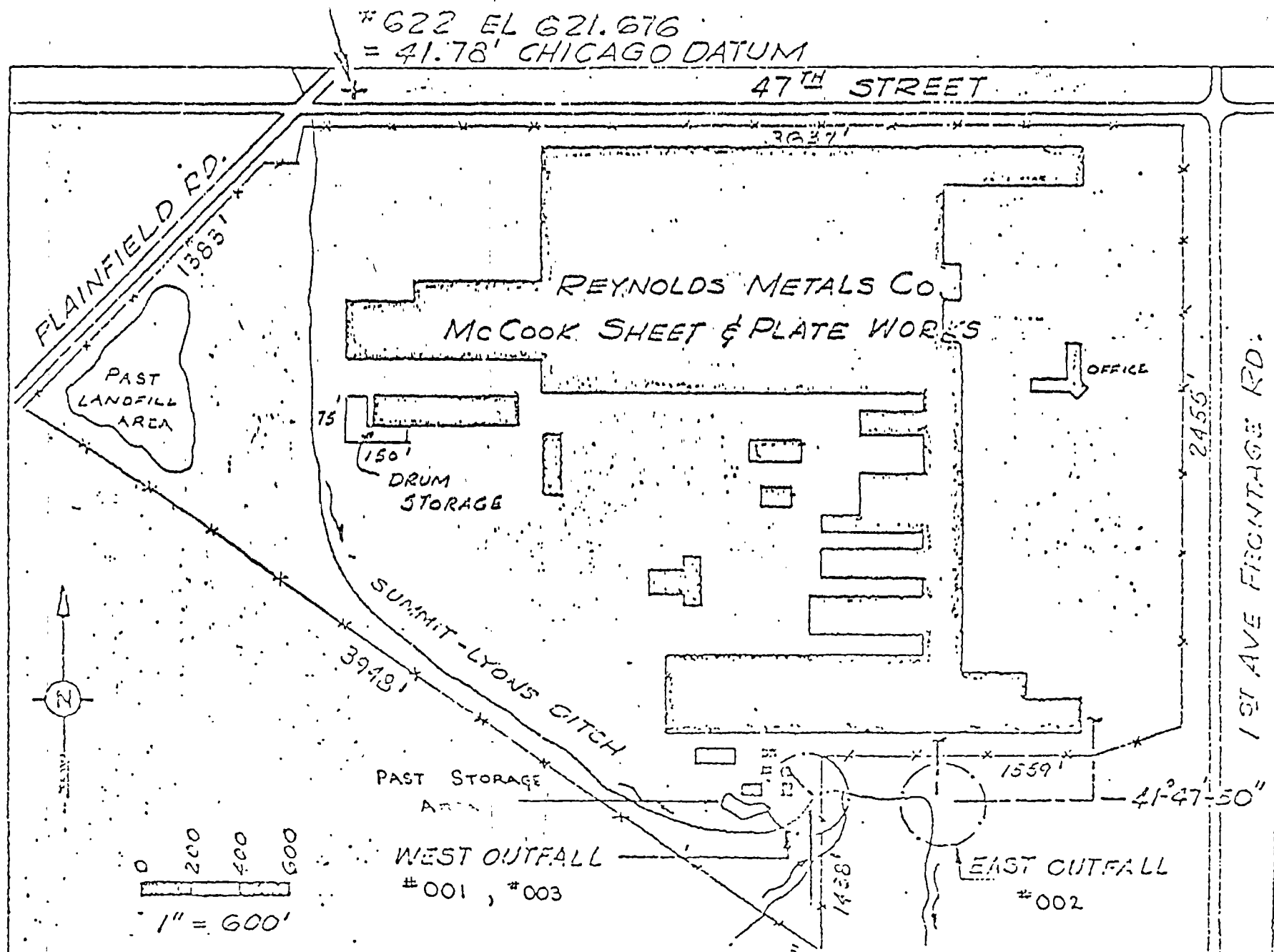
Legend

- S-3 Location and number of water supply well in Silurian Dolomite Aquifer and Hot Drift
- S-10 Location and number of water supply well in Cambrian-Ordovician Aquifer
- M-60 Location and number of monitoring well
- T-10 Location and number of test well
- A-1 Location of Generalized Geologic Profile A-A

0 1/4 1/2 3/4 1  
Scale, ft

REYNOLDS METALS CO.  
McCook, Ill.  
EPA I.D. 1005-2000  
FORM II, ITEM II





REYNOLDS METALS COMPANY  
McCook, Ill.  
EPA I.D. ILD005180070  
FORM I, ITEM XI

REYNOLDS METALS CO.  
McCOOK, ILLINOIS  
LOCATION PLAN

Reynolds Metals Company  
McCook Sheet & Plate Plant  
McCook, Illinois 60525  
EPA I.D. #ILD005180070

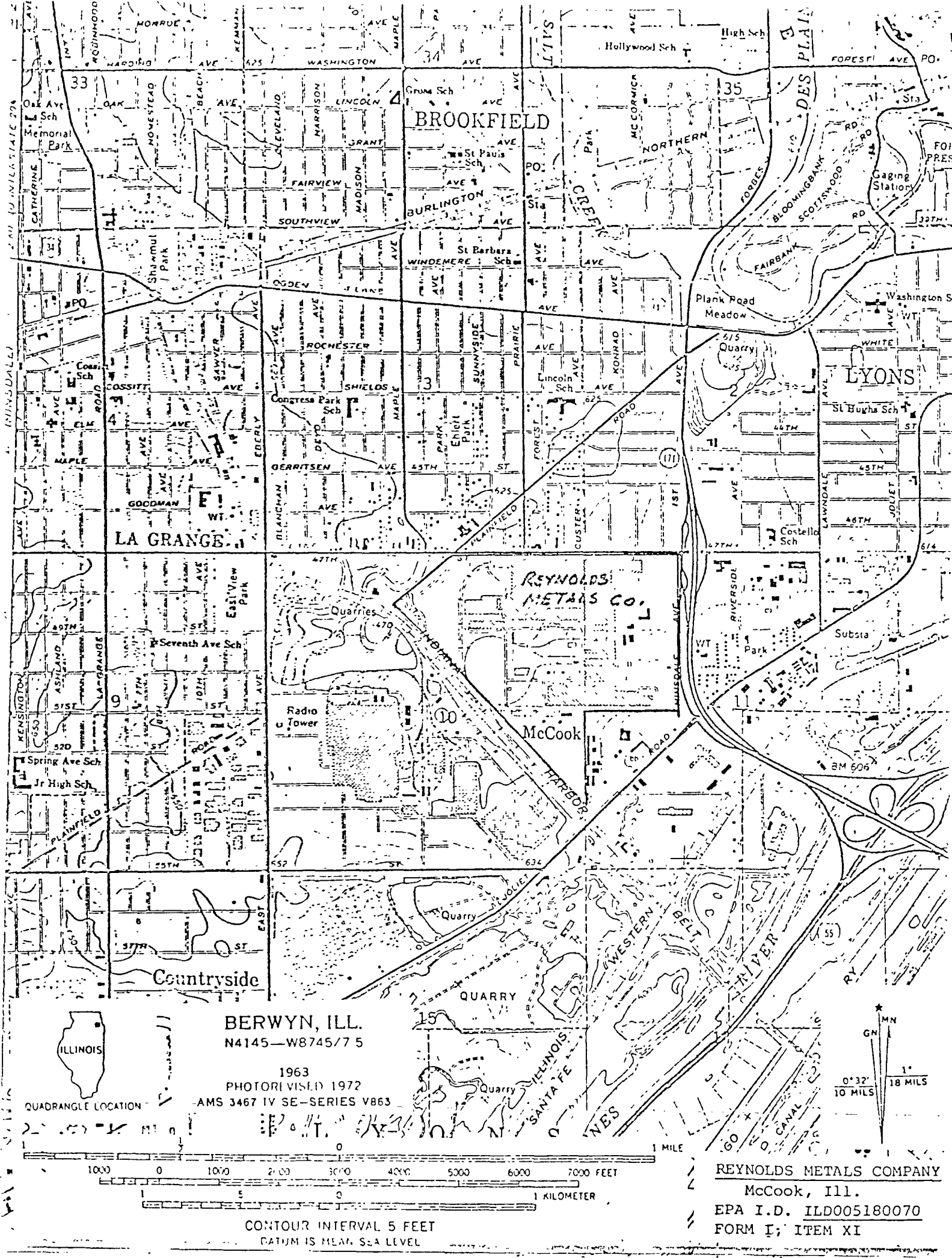
EPA FORM 3510-1 (6-80)

FORM I, Item X Existing Environmental Permits

E. Other

Existing Air Pollution Permits

Illinois EPA #00010026	Open Top Vapor Degreaser
" #00010027	Open Top Vapor Degreaser
" #02111062	Hot and Cold Rolling Facilities
" #09090026	Gasoline Storage Tank - 5000 Gal.
" #02111063	Plate Mill Facilities
" #02110496	Casting Facilities
" #03020547	Steam Generating Facilities
" #02111064	Metal Finishing Process
" #00030007	Aluminum Rolling Facility (#7 Mill) and Annealing Furnaces



BERWYN, ILL.  
N4145—W8745/7 5

1963  
PHOTOREVISED 1972  
AMS 3467 IV SE—SERIES V863

REYNOLDS METALS COMPANY  
McCook, Ill.  
EPA I.D. ILD005180070  
FORM I; ITEM XI



## REYNOLDS ALUMINUM

REYNOLDS METALS COMPANY • RICHMOND, VIRGINIA 23261

1980 November 18

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

EPA Region V  
RCRA Activities  
P. O. Box 7861  
Chicago, Illinois 60680

RE: Reynolds Metals Company  
RCRA Hazardous Waste  
Permit Applications

Gentlemen:

In accordance with the requirements of the 1980 May 19 hazardous waste management regulations, adopted pursuant to the Resource Conservation and Recovery Act (RCRA), please find attached hazardous waste permit applications for the following Reynolds Metals Company facilities located in the Region:

McCook Sheet & Plate Plant  
Ashville Building Products Plant

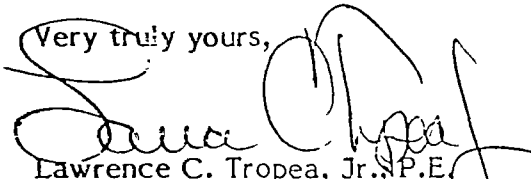
Reynolds believes that many of the provisions of the hazardous waste management regulations are unclear and imprecise and discussions with Agency representatives indicate confusion as to the Agency's interpretation of many provisions of the regulations. The uncertain nature of these regulations is evidenced by the fact that EPA is currently in the process of issuing amendments, interpretations, etc. Reynolds, therefore, reserves the rights to amend these permit applications at any time in the future. Further, Reynolds reserves the rights to file permit applications for other locations or activities, without prejudice or the loss of interim status, should further study and/or future EPA amendments, interpretations, etc. clarify or alter the applicable requirements in a manner which would require such action.

- 
- A The submission of these permit applications is not in anyway an admission on the part of Reynolds Metals Company that any of the reported substances are hazardous wastes, as defined under RCRA, or in subsequent promulgations, or that any of the referenced facilities are storers, treaters, or disposers of hazardous wastes or are the owners or operators of hazardous waste management facilities.

EPA Region V  
Page -2-  
1980 November 18

Reynolds hereby requests that this letter be made an official part of the record on Reynolds' solid waste management activities in the Region. If you have any questions, please feel free to contact Mr. C. R. Bent (804/281-2918) or myself (804/281-3871).

Very truly yours,



Lawrence C. Tropea, Jr., P.E.  
Director of Environmental Control  
Environmental Control Department

LCT/ja

CC: State of Illinois  
State of Ohio